11/25/2008 13:00

FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

		For Oth	ner inan An	Autnorize	∌a Commi	ittee		Office Use	Only	
1.			C MAILING LAE E OR PRINT 🙀		xample:If typi ver the lines	ng, type]	
	HCR Manor Care PAC							1		
ΑD	DRESS (number and street)	333 N	lorth Summit Str	eet		1 1 1 1 1	1 1 1	1 1 1 1 1	1 1 1 1 1	1
_		16th F	loor							
L	Check if different than previously reported. (ACC)	Toledo	0				ОН	436	604 2617	
2.	FEC IDENTIFICATION NUM	BER '	—	CITY 🛦			STATE	, Z	IPCODE A	
	C00260141			3. IS THIS REPOR	т	NEW (N) OR	X	AMENDED (A)		
4.	TYPE OF REPORT (Choose One) (a) Quarterly Reports:	`´ F	Monthly Report Due On:	Feb 20 (M2	3)	May 20 (M5) Jun 20 (M6)		Aug 20 (M8) Sep 20 (M9)	(Non-El Year Or	nly)) (M12) lection nly)
	April 15 Quarterly Report(Q2 July 15 Quarterly Report(Q2 X October 15 Quarterly Report(Q3	2) (0	c) 12-Day PRE-Electic Report for the		Primary (1 Convention		=	Oct 20 (M10) eral (12G) cial (12G)	Jan 31	
	January 31 Quarterly Report(YE		E	Election on					n the State of	
	July 31 Mid-Year Report(Non-election Year Only) (MY) Termination Report (TER)) (c	Post -Elect Report for the		General (3	80G)	Run		Specia n the State of	I (30S)
5.	Covering Period 0.7	0	1 200	8	through	0 9	30	2008		
	ertify that I have examined this For or Print Name of Treasurer		d to the best of r Frank Jannazo	ny knowledge	and belief it	is true, correct	and comp	olete.		
Sig	nature of Treasurer Electron	nically File	ed by Mr. Fran	nk Jannazo			Date	11 25	2008	
NO	TE : Submission of false, erron	eous, or i	incomplete infor	mation may s	ubject the pe	erson signing th	is Report	to the penalties o	f 2 U.S.C 437(g
	Office Use							l l	ORM 3X	

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

208058.82

179654.81

	FEC Form 3X (Rev	. 02/2003)				Page 2
	or Type Committee Na CR Manor Care PAC					
Repo	rt Covering the Period:	From:	M M D D D 0 1	2008	To:	0 9 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
				COLUMN A This Period		COLUMN B Calendar Year-to-Date
6. (a)	Cash on Hand January 1	ž008 [°]	Y			59846.35
(b)	Cash on Hand at Begining of Reporting	Period		65586.66		
(c)	Total Receipts (from I	ine 19)	0 0	29973.36	7 [148212.47

6(a) and 6(c) for Column B)				95	556	0.0	2		L.				_ 2	208	058	3.82	-
	_	 								-	-	-					_

95560.02

67156.01

- Cash on Hand at Close of Reporting Period 28404.01 28404.01
- 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) 0.00

(c) Total Receipts (from Line 19)

Total Disbursements (from Line 31)

(subtract Line 7 from Line 6(d))

(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines

10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name HCR Manor Care PAC

Report Covering the Period:

м м 0 7

From:

01

2008

To: 0 9 9 1

^D 3 0

2008

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	ontributions (other than loans) From:		
(a	·		
	Than Political Committees (i) Itemized (use Schedule A)	24639.99	120124.76
		5264.74	27838.45
	(ii) Unitemized(iii) TOTAL (add	20004.70	
	Lines 11(a)(i) and (ii)	29904.73	147963.21
(b	o) Political Party Committees	0.00	0.00
(0	·	0.00	0.00
(0	(such as PACs)	0.00	0.00
,	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	29904.73	147963.21
_			
	ransfers From Affiliated/Other arty Committees	0.00	0.00
ο Λ	Il Loans Received	0.00	0.00
). A	II Loans neceived	0.00	0.00
	oan Repayments Receivedffsets To Operating Expenditures	0.00	0.00
	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
	efunds of Contributions Made		
	Federal candidates and Other olitical Committees	0.00	0.00
	ther Federal Receipts		
	Dividends, Interest, etc.)	68.63	249.26
3. Т	ransfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(ITOTAL OCTIONALE TTO)		
(b) Levin Funds (from Schedule H5)	0.00	0.00
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. T	otal Receipts (add Lines 11(d),		
	2, 13, 14, 15, 16, 17, and 18(c))	29973.36	148212.47
	otal Federal Receipts	00070.00	140040.45
(s	subtract Line 18(c) from Line 19)	29973.36	148212.4

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 131.01 316.93 Expenditures..... (c) Total Operating Expenditures 131.01 316.93 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 44500.00 137500.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 22525.00 41837.88 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 67156.01 179654.81 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 67156.01 179654.81 from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	29904.73	147963.21
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	29904.73	147963.21
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	131.01	316.93
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	131.01	316.93

FE6AN026

Π	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS any information copied from such Reports and S	itatements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 11
	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	name and add	dress of any political committee to	o solicit contributions from such committee.
∠ .	Full Name (Last, First, Middle Initial) Anthony J Abela Mailing Address 3622 Deerfield Ct			Date of Receipt 0 9 1 7 2 0 0 8
	City	State	Zip Code	Transaction ID: SA11AI.28920
	Grass Lake FEC ID number of contributing federal political committee.	C	49240	Amount of Each Receipt this Period 311.52
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	, ' 	Director of Operation Year-to-Date ▼ 571.12	Biweekly P/R deduction of 51.92
 3.	Full Name (Last, First, Middle Initial) Charlean Adams Mailing Address 3523 East Manitou Circ	cle		Date of Receipt 0 9 1 7 2 0 0 8
	City	State	Zip Code	Transaction ID: SA11AI.28921
	Muskegeon	MI	49441	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		900.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administ	rator	Biweekly P/R deduction of 150
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1419.24	
	Full Name (Last, First, Middle Initial) Ms Gayla M. Adams Mailing Address 239 County Rd 4328			Date of Receipt 0 9 2 4 2 0 0 8
	City	State	Zip Code	Transaction ID: SA11AI.28922
	<u>Tenaha</u>	TX	75974	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		176.05 Biweekly P/R deduction of
	Name of Employer HCR Manor Care, Inc.		rator - Holiday	25.15
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 497.47	
	SUBTOTAL of Receipts This Page (optional)	1		1387.57

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	fo	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 66 (check only one) X 11a
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not e name and address	be sold or used by any pers s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Jennifer Adams Mailing Address 6968 Havington Court City		Zip Code	Date of Receipt M M
	Dublin FEC ID number of contributing	OH C	43017	Amount of Each Receipt this Period 46.16
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	Occupation Administrato Aggregate Yea		Biweekly P/R deduction of 23.08
_	Full Name (Last, First, Middle Initial) Martin D Allen Mailing Address 7151 Whispering Oak	1		Date of Receipt 0 9 1 7 2 0 0 8
	City	State	Zip Code	Transaction ID: SA11AI.28925
	Sylvania	ОН	43560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		923.10 Biweekly P/R deduction of
	Name of Employer HCR ManorCare Inc.		ernal Aud & Risk	153.85
	Receipt For: Primary General Other (specify)	Aggregate Yea	r-to-Date ▼ 2250.03	
_	Full Name (Last, First, Middle Initial) Michael Armstrong	1		Date of Receipt
	Mailing Address 115 N. Remington Rd			09 / 24 / 2008
	City Bexley	State OH	Zip Code 43209	Transaction ID: SA11AI.28927 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	T-5200	168.00
	Name of Employer HCR ManorCare Inc.	Occupation Administrato	r	Biweekly P/R deduction of 24
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 312.00	
Γ,	SUBTOTAL of Receipts This Page (optional) .	1		1137.26

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for e	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 8 / 66 (check only one) X 11a
\ C	any information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be e name and address of	sold or used by any perso any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	HCR Manor Care PAC			
	Full Name (Last, First, Middle Initial) Matthew Baad			Date of Receipt
	Mailing Address 528 Bonnie Circle			09 / 17 / 2008
	City		Code	Transaction ID: SA11AI.28942
	Howell	MI 48	843	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		72.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator		Biweekly P/R deduction of 12
	Receipt For:	Aggregate Year-to	-Date ▼	
	Primary General Other (specify) ▼		228.00	
_	Full Name (Last, First, Middle Initial) Tammy Barker-Cronin			Date of Receipt
	Mailing Address 4521 Sutton Road			09 17 2008
	City	State Zip	Code	Transaction ID: SA11AI.28944
	Britton	MI 49	229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		298.26
	Name of Employer HCR Manor Care, Inc.	Occupation AVP - Quality S	ystems	Biweekly P/R deduction of 49.71
	Receipt For:	Aggregate Year-to	-Date V	
	Primary General Other (specify) ▼		914.97	
_	Full Name (Last, First, Middle Initial) Jocelyn Barnes			Date of Receipt
	Mailing Address 428 169th Court NE			09 17 YYYY 2008
	City	State Zip	Code	Transaction ID: SA11AI.28945
	Bradenton	FL 34	212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		210.00
	Name of Employer HCR ManorCare Inc.	Occupation Regional Direct		Biweekly P/R deduction of 35
	Receipt For: Primary General	Aggregate Year-to	-Date ▼	
	Other (specify) ▼		665.00	
Γ	SUBTOTAL of Receipts This Page (optional)			580.26

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions
HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) Charles Batcher		Date of Receipt
Mailing Address 910 Orchard Drive		09 17 2008
City	State Zip Code	Transaction ID: SA11AI.28948
Rossford FEC ID number of contributing	OH 43460	Amount of Each Receipt this Period
federal political committee.	C	420.00
Name of Employer HCR Manor Care, Inc.	Occupation Director - Dementia Services	Biweekly P/R deduction of 70
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	490.00	
Full Name (Last, First, Middle Initial) Donald S Boger	1	Date of Receipt
Mailing Address 78 W. Kyla Marie Driv	ve	09 17 2008
City	State Zip Code	Transaction ID: SA11AI.28953
Newark	DE 19702	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer HCR ManorCare Inc.	Occupation Administrator	Biweekly P/R deduction of 15
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	255.00	
Full Name (Last, First, Middle Initial) David Burke	. L	Date of Receipt
Mailing Address 3908 Trickling Brook	Dr.	09 17 2008
City	State Zip Code	Transaction ID: SA11AI.28960
Richmond	VA 23228	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	115.38 Biweekly P/R deduction of
Name of Employer HCR ManorCare Inc.	Occupation Administrator	Biweekly P/R deduction of 19.23
Receipt For: Primary General	Aggregate Year-to-Date ▼	- I
Other (specify)	325.26	
SUBTOTAL of Receipts This Page (optional)		625.38

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may no e name and addre	ot be sold or used by any pers ss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Z	Full Name (Last, First, Middle Initial)			
	Candace Burks-McCoy Mailing Address 6115 North Ridge Ro	ad		Date of Receipt M M D D Y Y Y Y Y Y Y
	City Ft. Worth	State TX	Zip Code 76135	Transaction ID: SA11AI.28962 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify) ▼		nager Clinical Services ear-to-Date ▼ 220.00	Biweekly P/R deduction of 20
_	Full Name (Last, First, Middle Initial) Dena L Byrd-Byrum Mailing Address 113 Lowood Lane			Date of Receipt
	City	State	Zip Code	0 9 2 4 2 0 0 8 Transaction ID: SA11Al.28964
	Greenville	SC	29605	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		175.00
	Name of Employer HCR ManorCare Inc.	Occupation Administrat	tor	Biweekly P/R deduction of 25
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 465.00	
_	Full Name (Last, First, Middle Initial) Charlie F Byrne			Date of Receipt
	Mailing Address 4685 Rio Poco Court			09 17 YYYY 2008
	City <u>Naples</u>	State FL	Zip Code 33109	Transaction ID: SA11AI.28965 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		265.38
	Name of Employer HCR ManorCare Inc.	Occupation Sr Adminis	trator	Biweekly P/R deduction of 44.23
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 775.76	
	SUBTOTAL of Receipts This Page (optional) .	1		560.38

Π	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS any information copied from such Reports and S	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 66 (check only one) X
	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	name and address of any political committee	to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Shirley D Cabildo Mailing Address 38 Bentley Court City Bedminster FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For:	State Zip Code NJ 07921 C Occupation Administrator Aggregate Year-to-Date	Date of Receipt M M
 3.	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Nancy L Caras Mailing Address 1260 Thornapple Dr	244.06	Date of Receipt
	City Osprey FEC ID number of contributing federal political committee.	State Zip Code FL 34229 C	Transaction ID: SA11AI.28970 Amount of Each Receipt this Period 83.10 Biweekly P/R deduction of
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 415.50	27.70
	Full Name (Last, First, Middle Initial) Javier Cavero Mailing Address 3077 N. Oakland Fores	st Dr. #202	Date of Receipt 0 9 1 7 2 0 0 8
	City	State Zip Code	Transaction ID: SA11AI.28974
	Oakland Park FEC ID number of contributing federal political committee.	FL 33309	Amount of Each Receipt this Period 102.00
	Name of Employer HCR ManorCare Inc.	Occupation Administrator	Biweekly P/R deduction of 17
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 204.00	
	SUBTOTAL of Receipts This Page (optional)	I	265.86

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
0	ony information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any per name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	HCR Manor Care PAC		
	Full Name (Last, First, Middle Initial) Ms Lisa Cherry		Date of Receipt
	Mailing Address 1971 A Allwood Drive		09 17 2008
	City <u>Bethlehem</u>	State Zip Code PA 18018	Transaction ID: SA11AI.28975 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	46.26
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Biweekly P/R deduction of 15.42
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 246.20	
_	Full Name (Last, First, Middle Initial) Barry Chesterman		Date of Receipt
	Mailing Address 13132 Ludlow Avenue		07 09 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11Al.28976
	Huntington Woods FEC ID number of contributing federal political committee.	MI 48070	Amount of Each Receipt this Period 29.00
	Name of Employer HCR Manor Care, Inc.	Occupation Regional Rehab Manager	Biweekly P/R deduction of 29
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	406.00	
_	Full Name (Last, First, Middle Initial) Lenette A Clark	<u> </u>	Date of Receipt
	Mailing Address 1259 Tower Court		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.28977
	Bourbannais FEC ID number of contributing federal political committee.	IL 60914	Amount of Each Receipt this Period 199.92
	Name of Employer HCR Manor Care, Inc	Occupation Administrator	Biweekly P/R deduction of 33.32
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 366.52	
Г	SUBTOTAL of Receipts This Page (optional)		275.18

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any peen ame and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms Denise Clements		Date of Receipt
	Mailing Address 16953 S. Mohican Driv	/e	07 16 7 2008
	City Lockport	State Zip Code IL 60441	Transaction ID: SA11AI.28979 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator - Oak Lawn West	Biweekly P/R deduction of 20
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Stephen Coetzee		Date of Receipt
	Mailing Address PO Box 85	07 09 7 2008	
	City	State Zip Code	Transaction ID: SA11AI.28980
	Neport FEC ID number of contributing	PA 17074	Amount of Each Receipt this Period
	federal political committee.	C	25.00
	Name of Employer HCR. Manor Care	Occupation Administrator	Biweekly P/R deduction of 25
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	
	Full Name (Last, First, Middle Initial) Ms Pamela Cox	Date of Receipt	
	Mailing Address 6238 Shadowood Circ	07 09 7 2008	
	City	State Zip Code	Transaction ID: SA11AI.28984
	Naples FEC ID number of contributing federal political committee.	FL 34112	Amount of Each Receipt this Period 35.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Administrator	Biweekly P/R deduction of 35
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	
	IIRTOTAL of Receipts This Page (ontional)		100.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 66 (check only one) X 11a
\ \ \	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements ma e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms Deborah Csaszar Mailing Address 3715 Spear St. City Bethlehem FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc.	State PA C		Date of Receipt M M M
	Receipt For: Primary Other (specify)	_ ' _ <u> </u>	d Care Consultant - Eastern Year-to-Date ▼ 343.52	
	Full Name (Last, First, Middle Initial) Jamie S D'Angelo Mailing Address 26 Oakland Ave			Date of Receipt 0 9 1 7 2 0 0 8
	City	State	Zip Code	Transaction ID: SA11AI.28988
	Wheeling	WV	26003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			119.82
	Name of Employer HCR ManorCare Inc.	Occupatio Administ	rator	Biweekly P/R deduction of 19.97
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 372.50	
_	Full Name (Last, First, Middle Initial) Linda J Dailey	Date of Receipt		
	Mailing Address 126 Cornerstone Dr.			07 09 7 2008
	City	State	Zip Code	Transaction ID: SA11AI.28987
	Marietta FEC ID number of contributing federal political committee.	OH C	45750	Amount of Each Receipt this Period 22.00
	Name of Employer HCR ManorCare Inc. Administ			Biweekly P/R deduction of 22
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 308.00	
	SUBTOTAL of Receipts This Page (optional)	1		250.30

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 66 (check only one) X 11a
A 0	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may ne name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Karen L Davidson Mailing Address 612 W. Magnolia City Pana FEC ID number of contributing federal political committee.	State IL	Zip Code 62557	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼		n ical Services e Year-to-Date ▼ 726.96	Biweekly P/R deduction of 52
	Full Name (Last, First, Middle Initial) Danny M Davis Mailing Address P.O. Box 1252	•		Date of Receipt 0 9 2 4 2 0 0 8
	City	State	Zip Code	Transaction ID: SA11AI.28991
	Charleston	WV	25325	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			105.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administ		Biweekly P/R deduction of 15
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.80	
	Full Name (Last, First, Middle Initial) Brenda Decker	Date of Receipt		
	Mailing Address 69 E. Pettibone Street			07 09 7 2008
	City	State	Zip Code	Transaction ID: SA11AI.28992
	Forty Fort PA FEC ID number of contributing federal political committee.		18704	Amount of Each Receipt this Period 24.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administ		Biweekly P/R deduction of 24
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 337.56	
Γ,	SUBTOTAL of Receipts This Page (optional)	1		181.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
7	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may ne name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Kathleen Dell Mailing Address 5750 Belle Avenue City Davenport FEC ID number of contributing federal political committee.	State IA	Zip Code 52807	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify) ▼	_ · _ ·	n Rehab Manager e Year-to-Date ▼ 532.70	Biweekly P/R deduction of 28.50
	Full Name (Last, First, Middle Initial) Timothy C Dietzen Mailing Address 3615 Sunnyview Rd			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.28997
	Appleton	WI	54914	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Occupat Adminis			175.00
				Biweekly P/R deduction of 25
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) David K Donin	Date of Receipt		
	Mailing Address 11608 Everglade Court			09 / 24 / 2008
	City North Potomac	State MD	Zip Code 20878	Transaction ID: SA11AI.28999 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20070	212.03
	Name of Employer HCR Manor Care, Inc. Occupation Administ			Biweekly P/R deduction of 30.29
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 605.80	
Γ	SUBTOTAL of Receipts This Page (optional)			558.03

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms Nancy Edwards Mailing Address 5726 Rolbesay Drive City Dublin FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43017 C Occupation General Manager, Central Division Aggregate Year-to-Date ▼ 2688.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) R Michael Ferguson Mailing Address 2450 Underhill Rd City Toledo FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43615 C Occupation VP & Dir of Purchasing Aggregate Year-to-Date ▼ 1307.72	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Sara M Fielding-Russell Mailing Address 3601 Hawthorne Dr City Richfield FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 44286 C Occupation Administrator Aggregate Year-to-Date 393.53	Date of Receipt M M
SUBTOTAL of Receipts This Page (optional)	······	755.70

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate sched for each category of Detailed Summary	f the Crieck only one)
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	tatements may not be sold or used by name and address of any political co	y any person for the purpose of soliciting contributions immittee to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)		Data of Descipt
•	Elizabeth M Foley Mailing Address 2313 Rockspring Rd		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Toledo	State Zip Code OH 43614	Transaction ID: SA11AI.29014 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	194.70
	Name of Employer HCR ManorCare Inc. Receipt For:	Occupation Legal Counsel II Aggregate Year-to-Date	Biweekly P/R deduction of 32.45
	Primary General Other (specify) ▼		09.05
	Full Name (Last, First, Middle Initial) Karen L Forrest		Date of Receipt
	Mailing Address 3115 Wynstone Dr	09 / 17 / 2008	
	City	State Zip Code	Transaction ID: SA11AI.29015
	Quincy FEC ID number of contributing federal political committee.	IL 62305	Amount of Each Receipt this Period 357.24
	Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Operati	Biweekly P/R deduction of 59.54
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	00.54
	Full Name (Last, First, Middle Initial) Jamie Fox	Date of Receipt	
	Mailing Address 705A Allentown Rd	09 17 2008	
	City Sellersville	State Zip Code PA 18960	Transaction ID: SA11AI.29016 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	121.20
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Biweekly P/R deduction of 20.20
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	67.56
SI	UBTOTAL of Receipts This Page (optional)		673.14

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 66 (check only one) X 11a
Any information copied from such Repor or for commercial purposes, other than use NAME OF COMMITTEE (In Full) HCR Manor Care PAC	ts and Statements may not be sold or used by any perso sing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) George Frill Mailing Address 2006 Hale Ct City Wyomiseing FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code PA 19610 C Occupation Administrator - Laureldale Aggregate Year-to-Date ▼ 370.69	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Charles T George Mailing Address 111 Pepperbusi City Bellefontaine FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43311 C Occupation Administrator Aggregate Year-to-Date 370.58	Date of Receipt M M
Full Name (Last, First, Middle Initial) Larry Robert Godla Mailing Address 1556 Mary Eller City Mclean FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	C State Zip Code VA 22101 C Occupation VP Develop/Construction Aggregate Year-to-Date ▼ 1076.96	Date of Receipt M M O 7 O 9 2 0 0 8 Transaction ID: SA11AI.29024 Amount of Each Receipt this Period 77.00 Biweekly P/R deduction of
SUBTOTAL of Receipts This Page (op	tional)	240.21

	HEDULE A (FEC Form 3X) MIZED RECEIPTS	Use separate sched for each category of Detailed Summary P	the (crieck only only)
or for	nformation copied from such Reports and S commercial purposes, other than using the AME OF COMMITTEE (In Full) CR Manor Care PAC	tatements may not be sold or used by name and address of any political con	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
/	ull Name (Last, First, Middle Initial) r. John Graham ailing Address 3000 Riva Ridge Rd	State Zip Code	Date of Receipt M M M O 7 O 9 O 9 O 9 O 0 8 Transaction ID: SA11Al.29028
<u>T</u>	oledo EC ID number of contributing	OH 43615	Amount of Each Receipt this Period
Na H	deral political committee. ame of Employer CR.ManorCare, Inc. eceipt For: Primary General Other (specify)	Occupation VP/GM - Heartland Hospice Aggregate Year-to-Date 215	
. <u>R</u> ı	ull Name (Last, First, Middle Initial) uth G Graziano ailing Address 503 Elk Mills Road		Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FE	EC ID number of contributing	State Zip Code PA 19363	Transaction ID: SA11AI.29030 Amount of Each Receipt this Period 53.85
Na H	deral political committee. ame of Employer CR ManorCare Inc.	Occupation Regional Director of Operation	Biweekly P/R deduction of 53.85
Re	eceipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	3.90
De	ull Name (Last, First, Middle Initial) eborah L Gross ailing Address 687 Westview NW	Date of Receipt 0 7 0 9 2 0 0 8	
Ci	ity irand Rapids	State Zip Code MI 49504	Transaction ID: SA11AI.29031
FE	EC ID number of contributing deral political committee.	MI 49504	Amount of Each Receipt this Period 20.00
Na H	ame of Employer CR Manor Care, Inc.	Occupation Administrator - Crestview	Biweekly P/R deduction of 20
Re	eceipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 28	0.00
SUB	STOTAL of Receipts This Page (optional)		227.70

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 66 (check only one) X
Ai or	ny information copied from such Reports and a for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any person e name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Stephen L Guillard Mailing Address 217 Garden St. City Needham FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc.	State Zip Code MA 02492 C	Date of Receipt M
	Receipt For: Primary Other (specify)	Executive Vice President Aggregate Year-to-Date ▼ 3653.83	
3.	Full Name (Last, First, Middle Initial) Karen Harris Mailing Address 8250 SW 8th St City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	North Lauderdale FEC ID number of contributing federal political committee. Name of Employer	FL 33068 C Occupation	Amount of Each Receipt this Period 44.02 Biweekly P/R deduction of
	Receipt For: Primary Other (specify)	Assistant Administrator Aggregate Year-to-Date ▼ 330.15	22.01
 ;.	Full Name (Last, First, Middle Initial) Mr. Alan Hash Mailing Address 9496South Dunbar Ci	Date of Receipt	
	City South Jordan	State Zip Code UT 84095	Transaction ID: SA11AI.29035 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	Occupation	180.00 Biweekly P/R deduction of
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	Regional Director - Western Division 5 Aggregate Year-to-Date ▼ 540.00	5
s	SUBTOTAL of Receipts This Page (optional) .	_	1377.88

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee t	on for the purpose of soliciting contributions
HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) Kevin C Henricks		Date of Receipt
Mailing Address 23 Chicago St. Apt.G	09 17 2008	
City	State Zip Code	Transaction ID: SA11AI.29036
Plainfield	IL 60544	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	252.00
Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Operation	Biweekly P/R deduction of 42
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	784.00	
Full Name (Last, First, Middle Initial) Mary I Herman	Date of Receipt	
Mailing Address 418 Highland Ave. RF	09 24 YYYY 2008	
City	State Zip Code	Transaction ID: SA11AI.29037
Clarks Summit	PA 18411	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	94.22
Name of Employer HCR ManorCare Inc.	Occupation Administrator	Biweekly P/R deduction of 13.46
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	265.84	
Full Name (Last, First, Middle Initial) Elizabeth B. Hill	Date of Receipt	
Mailing Address 1285 Sunhill Drive	0 9 2 4 2 0 0 8	
City	State Zip Code	Transaction ID: SA11AI.29038
Lawrenceville	GA 30043	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.83
Name of Employer HCR.ManorCare, Inc.	Occupation Administrator	Biweekly P/R deduction of 28.69
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	315.59	
SUBTOTAL of Receipts This Page (optional) .	1	547.05

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 66 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) HCR Manor Care PAC	nd Statements ma g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Timothy M Hock			Date of Receipt
Mailing Address 8054 Tillicum Grov	09 17 2008		
City Rockford	State MI	Zip Code 49341	Transaction ID: SA11AI.29039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1001	230.76
Name of Employer HCR ManorCare Inc.	Occupatio Regional	n Director of Ops	Biweekly P/R deduction of 38.46
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mr. Paul E. Hoffman Mailing Address 4820 Phone Drive	I		Date of Receipt
Mailing Address 4829 Rhone Drive			09 17 2008
City Maumee	State OH	Zip Code 43537	Transaction ID: SA11AI.29040
FEC ID number of contributing federal political committee.	FEC ID number of contributing		Amount of Each Receipt this Period 140.40
Name of Employer HCR Manor Care, Inc.	Occupatio Director	n of Ops Support - Midstates	Biweekly P/R deduction of 23.40
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 437.53	
Full Name (Last, First, Middle Initial) Rodger J Hogan			Date of Receipt
Mailing Address 101 Mercury Way			09 24 2008
City	State	Zip Code	Transaction ID: SA11AI.29041
Pleasant Hill FEC ID number of contributing federal political committee.	CA	94523	Amount of Each Receipt this Period 238.00
Name of Employer HCR Manor Care Inc Administ			Biweekly P/R deduction of 34
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	
SUBTOTAL of Receipts This Page (optional	al))	609.16

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 66 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any personal dress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
NAME OF COMMITTEE (In Full) HCR Manor Care PAC		,,,	
Full Name (Last, First, Middle Initial) Lynn M Hood			Date of Receipt
Mailing Address 15415 Meadow Wo	od Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11AI.29044
Wellington FEC ID number of contributing federal political committee.	C	33414	Amount of Each Receipt this Period 95.00
Name of Employer HCR ManorCare Inc.	Occupation Asst Gen		Biweekly P/R deduction of 95
Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3330.00	
Full Name (Last, First, Middle Initial) Kathryn Hoops	Date of Receipt		
Mailing Address 24708 McCutchenville Road			0 9 1 7 2 0 0 8 Transaction ID: SA11AI.29045
City Perrysbura	City State Zip Code Perrysburg OH 43551		
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 692.28
Name of Employer HCR.ManorCare, Inc. Occupati VP of T			Biweekly P/R deduction of 115.38
Receipt For: Primary General Other (specify) ▼	- '	Year-to-Date ▼ 1038.42	
Full Name (Last, First, Middle Initial) Mr. John Huber			Date of Receipt
Mailing Address 26448 Carronade Drive			07 09 2008
City	State	Zip Code	Transaction ID: SA11AI.29047
Perrysburg FEC ID number of contributing federal political committee.	C	43551	Amount of Each Receipt this Period 45.00
Name of Employer HCR.ManorCare, Inc.	Occupation Regional	n Director of Operations	Biweekly P/R deduction of 45
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 630.00	
SUBTOTAL of Receipts This Page (optional	ıl)		832.28

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	
A 0	ny information copied from such Reports and Str for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used by any name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
. ∠ 	Full Name (Last, First, Middle Initial) Rebecca J Hullinger Mailing Address 1250 Horseshoe Cir #1	05	Date of Receipt
	City Ann Arbor	State Zip Code MI 48108	Transaction ID: SA11AI.29048 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Occupation Clinical Prog Implem Consult Aggregate Year-to-Date ▼ 560.00	Biweekly P/R deduction of 40
- 3.	Full Name (Last, First, Middle Initial) Rebecca S Jablon Mailing Address 3349 Fairbanks Ave		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.29052
	TOLEDO FEC ID number of contributing federal political committee.	OH 43615	Amount of Each Receipt this Period 155.76
	Name of Employer HCR ManorCare Inc.	Occupation Admin Dir Of Nursing Serv	Biweekly P/R deduction of 25.96
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 285.50	6
_	Full Name (Last, First, Middle Initial) Frank A Jannazo		Date of Receipt
	Mailing Address 3466 Country Farms R	oad	09 17 2008
	City Oregon	State Zip Code OH 43616	Transaction ID: SA11Al.29053 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70.00
	Name of Employer HCR ManorCare Inc.	Occupation Dir^ Accounts Receivable	Biweekly P/R deduction of 35
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 525.00	0
	SUBTOTAL of Receipts This Page (optional)		265.76

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate sch for each category Detailed Summar	of the (Check only one)
A	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HOR Manor Care PAC	Statements may not be sold or used e name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
 	Full Name (Last, First, Middle Initial) Gina Elizabeth Jennings Mailing Address 7 Eva Court City Baltimore	State Zip Code MD 21220	Date of Receipt 0 9 1 7 2 0 0 8 Transaction ID: SA11AI.29054
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 113.40
	Name of Employer HCR Manor Care, Inc Receipt For: Primary General Other (specify) ▼	Occupation ADNS Aggregate Year-to-Date	Biweekly P/R deduction of 18.90
	Full Name (Last, First, Middle Initial) Ms Diane Johnson Mailing Address 206 Ruth Road		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.29055
	FEC ID number of contributing federal political committee.	PA 19522	Amount of Each Receipt this Period 71.88 Biweekly P/R deduction of
	Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Regional Director of Opera Aggregate Year-to-Date 1	71.88 °
	Full Name (Last, First, Middle Initial) Nancy E Johnson Mailing Address 4266 Shire Landing		Date of Receipt
		7.0	09 17 2008
	City Hillard	State Zip Code OH 43026	Transaction ID: SA11AI.29056 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	307.20
	Name of Employer HCR Manor Care, Inc.	Occupation Regional Director of Ops	Biweekly P/R deduction of 51.20
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	957.04
5	SUBTOTAL of Receipts This Page (optional)	1	492.48

ITEMIZE	D RECEIPTS on copied from such Benorts and St	atements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 11 con for the purpose of soliciting contributions
or for comme	roial purposes, other than using the recommittee (In Full) nor Care PAC	name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name Lisa J. Jur Mailing Ad City Toledo	***	State OH	Zip Code 43605	Date of Receipt M M M
FEC ID not federal polynomer of Inches HCR. Mar Receipt F		-		400.00 Contribution
Receipt F	Apt. #909 umber of contributing litical committee. Employer or Care, Inc.	· · ·	Zip Code 43604 Marketing Year-to-Date 288.47	Date of Receipt M M M
Mrs. Kathy Mailing Ad City Bettende FEC ID noted federal poor Name of It HCR Mar Receipt F	orf umber of contributing litical committee. Employer or Care Inc.		Zip Code 52722 n dministrator Year-to-Date ▼ 210.00	Date of Receipt M M M
SUBTOTAL	of Receipts This Page (optional)			541.24

	HEDULE A (FEC Form 3X) MIZED RECEIPTS	for each cat	te schedule(s) tegory of the immary Page	FOR LINE NUMBER: PAGE 28 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
or for	nformation copied from such Reports and S r commercial purposes, other than using the AME OF COMMITTEE (In Full)	atements may not be sold or name and address of any po	used by any person litical committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
/ H	ICR Manor Care PAC			
	ull Name (Last, First, Middle Initial) nthony J Keelin			Date of Receipt
M	lailing Address 2208 26th Avenue^ So	uth		09 17 2008
	ity	State Zip Code		Transaction ID: SA11AI.29062
_	argo	ND 58103		Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		150.00
N: H	ame of Employer ICR ManorCare Inc.	Occupation Administrator		Biweekly P/R deduction of 25
R	eceipt For:	Aggregate Year-to-Date	▼	_
	Primary General Other (specify) ▼		275.00	
	ull Name (Last, First, Middle Initial) ivian Kiraly			Date of Receipt
M	Mailing Address 103 Kama Lane			07 09 YYYYY 2008
	ity	State Zip Code		Transaction ID: SA11AI.29063
	Cross Lanes	WV 25313		Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		26.50
N: H	ame of Employer ICR Manor Care, Inc.	Occupation Administrator		Biweekly P/R deduction of 26.50
R	eceipt For:	Aggregate Year-to-Date	▼	
-	Primary General Other (specify) ▼		371.00	
	ull Name (Last, First, Middle Initial)			Date of Receipt
_	lailing Address 7620 Isaac Drive			0 9 1 7 2 0 0 8
	ity	State Zip Code		Transaction ID: SA11AI.29064
_	Middleburg Heights	OH 44130		Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		300.00
N: H	ame of Employer CR Manor Care, Inc.	Occupation RDO - Central 5		Biweekly P/R deduction of 50
R	eceipt For:	Aggregate Year-to-Date	▼	1
	Primary General Other (specify) ▼		950.00	
				476.50

SCHEDULE A (FEC FO ITEMIZED RECEIPTS	rm 3X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such R or for commercial purposes, other the NAME OF COMMITTEE (In Full HCR Manor Care PAC	eports and Statements may not be sold or used by any per an using the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Ini Amy LaFleur Mailing Address 207 S. Ann City Saline FEC ID number of contributing federal political committee.	<u> </u>	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer HCR. Manor Care, Inc Receipt For: Primary General Other (specify) ▼	Occupation Regional Director of Operations Aggregate Year-to-Date 546.00	Biweekly P/R deduction of 39
Full Name (Last, First, Middle Ini Mr. David Lanning Mailing Address 806 Copley City	<u> </u>	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Silver Spring FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc.	MD 20904 C Occupation	Amount of Each Receipt this Period 195.00 Biweekly P/R deduction of 97.50
Receipt For: Primary General Other (specify)	Vice President, Development Aggregate Year-to-Date ▼ 820.00	
Full Name (Last, First, Middle Ini Michael Lavin Mailing Address 205 Foxmar	<u> </u>	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Glen Burnie	State Zip Code MD 21061	Transaction ID: SA11AI.29071 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	154.50 Biweekly P/R deduction of
Name of Employer HCR Manor Care, Inc. Receipt For:	Occupation AIT Aggregate Year-to-Date ▼	25.75
Primary General Other (specify) ▼	481.87	
SUBTOTAL of Receipts This Page	(optional)	388.50

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
or for co	ommercial purposes, other than using the ME OF COMMITTEE (In Full)	Statements may e name and ado	rnot be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
) HC	R Manor Care PAC			
. Terr	Name (Last, First, Middle Initial) y L Lawrence Nelson			Date of Receipt
	ing Address 1880 Oldfield Dr.			07 09 7 2008
City Hur	ntingtown	State MD	Zip Code 20639	Transaction ID: SA11AI.29072 Amount of Each Receipt this Period
FEC	CID number of contributing political committee.	C		36.50
Nam HCF	ne of Employer R ManorCare Inc.	Occupation Clinical S	n Services ConsultantRN	Biweekly P/R deduction of 36.50
Rec	eipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 511.52	
	Name (Last, First, Middle Initial) y C Lester			Date of Receipt
Mail	ing Address 13507 Westbrook			08 20 2008
City		State	Zip Code	Transaction ID: SA11AI.29073
FEC	mouth CID number of contributing eral political committee.	C	48170	Amount of Each Receipt this Period 340.00
Nam HCF	ne of Employer R ManorCare Inc.	Occupation General N	n Mgr^ VP Marketing	Biweekly P/R deduction of 85
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1445.00	
	Name (Last, First, Middle Initial) ecca R Lichtenberger	1		Date of Receipt
Mail	ing Address 558 N. Hillcrest Blvd.			07 09 YYYY 2008
City		State	Zip Code	Transaction ID: SA11AI.29074
FEC	Catur CID number of contributing eral political committee.	C	62522	Amount of Each Receipt this Period 23.20
Nam HCF	ne of Employer R Manor Care, Inc.	Occupation Clinical S	n Services Consultant	Biweekly P/R deduction of 23.20
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 324.80	
	OTAL of Receipts This Page (optional)	1		399.70

	OULE A (FEC Form 3X) ED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 66 (check only one) X
or for com	nation copied from such Reports and St mercial purposes, other than using the OF COMMITTEE (In Full) Manor Care PAC	atements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Na Kathlee	me (Last, First, Middle Initial) en A Long Address 4815 Woodmark Court		Date of Receipt 0 7 1 0 2 0 0 8
	Vayne Display in the state of	State Zip Code IN 46815	Transaction ID: SA11AI.29075 Amount of Each Receipt this Period
Name of HCR N	political committee. of Employer Manor Care, Inc.	Occupation Administrator Aggregate Year-to-Date 400.40	Weekly P/R deduction of 14.30
Full Na Carrie I	me (Last, First, Middle Initial)	State Zip Code	Date of Receipt M
federal	a number of contributing political committee. of Employer Manor Care, Inc.	C Occupation Sr. Administrator - Palm Harbor	Amount of Each Receipt this Period 268.92 Biweekly P/R deduction of 46
	t For: Primary ☐ General Other (specify) ♥	Aggregate Year-to-Date ▼ 843.91	
Gretche Mailing	me (Last, First, Middle Initial) en W Mangone Address 5234 Reddington		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	n number of contributing political committee.	State Zip Code OH 43017	Transaction ID: SA11AI.29082 Amount of Each Receipt this Period 150.00
Name of HCR N	of Employer ManorCare Inc.	Occupation Administrator	Biweekly P/R deduction of 25
	t For: Primary ☐ General Other (specify) ♥	Aggregate Year-to-Date ▼ 300.00	•
SUBTOT	AL of Receipts This Page (optional)		447.52

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any personders of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	HCR Manor Care PAC			
_	Full Name (Last, First, Middle Initial) Sephanie M Marcotullio			Date of Receipt
	Mailing Address 49895 Waterstone Est	tates Circle		0 9 2 4 2 0 0 8
	City	State	Zip Code	Transaction ID: SA11AI.29084
	Northville	MI	48168	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administ		Biweekly P/R deduction of 20
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 290.00	
_	Full Name (Last, First, Middle Initial) Debra Martindale			Date of Receipt
	Mailing Address PO Box 94	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11AI.29087
	Smithfield	<u> L</u>	61477	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.74
	Name of Employer HCR. Manor Care, Inc	Occupation Admission	n ons Director	Biweekly P/R deduction of 10.82
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		212.20	
	Full Name (Last, First, Middle Initial) Anita M Martinez	1		Date of Receipt
	Mailing Address 909 Gainesway Court			09 17 2008
	City	State	Zip Code	Transaction ID: SA11AI.29088
	Florissant	MO	63034	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		155.76
	Name of Employer HCR ManorCare Inc.	Occupation Administ		Biweekly P/R deduction of 25.96
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 362.36	
Г	SUBTOTAL of Receipts This Page (optional)	1		371.50

	HEDULE A (FEC Form 3X) MIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or fo	information copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	tatements may not be sold or used by any pename and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
F C N F fe	Full Name (Last, First, Middle Initial) Nancy F Mason Mailing Address 56 Holden Dr City Martinsburg FEC ID number of contributing ederal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General	State Zip Code WV 25401 C Occupation Administrator Aggregate Year-to-Date	Date of Receipt M M
N N	Other (specify) Full Name (Last, First, Middle Initial) Ms. Janet Mastrangelo (Howells) Mailing Address 266 Crossing Creek Noticity	orth State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
F fe N	Gahanna FEC ID number of contributing ederal political committee. Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify)	OH 43230 C Occupation Assistant Vice President of Rehab Aggregate Year-to-Date 605.00	Transaction ID: SA11AI.29092 Amount of Each Receipt this Period 330.00 Biweekly P/R deduction of 55
P M C F fe	Patricia McCormick Mailing Address 113 Holly Lane City Perrysburg FEC ID number of contributing ederal political committee.	State Zip Code OH 43551	Date of Receipt M M
_	Name of Employer HCR Manor Care, Inc Receipt For: Primary General Other (specify)	Occupation Legal Counsel Aggregate Year-to-Date 360.00	30
SUE	BTOTAL of Receipts This Page (optional)		615.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 66 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may no e name and address	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) William J McDaniel II Mailing Address 7420 Nightingale Dr. # City Holland FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc.	State OH C	Zip Code 45328	Date of Receipt M M
Receipt For: Primary General Other (specify)	Administrat Aggregate Ye	tor ear-to-Date ▼ 274.50	
Full Name (Last, First, Middle Initial) Deborah A McMonagle Mailing Address 1632 Patricia Ave	1		Date of Receipt 0 7 1 7 2 0 0 8
City	State	Zip Code	Transaction ID: SA11AI.29098
Willow Grove	PA	19090	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		Weekly P/R deduction of
Name of Employer HCR ManorCare Inc.	General Ma	anager	29.04
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 842.08	
Full Name (Last, First, Middle Initial) Robert E McQuillan	l		Date of Receipt
Mailing Address 604 Stoney Run Road			09 16 2008
City	State	Zip Code	Transaction ID: SA11AI.28876
Pottsville	PA	17901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00 Contribution
Name of Employer HCR ManorCare Inc.	+	irector of Operation	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			373.64

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 66 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	tatements may not be sold or used by any per- name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Murry J Mercier Mailing Address 7110 Oak Bluff Lane City Maumee FEC ID number of contributing federal political committee.	State Zip Code OH 43537 C	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Name of Employer HCR ManorCare Inc. Receipt For: Primary Other (specify) ▼	VP Dir of Information Serv Aggregate Year-to-Date ▼ 2692.28	192.25
Full Name (Last, First, Middle Initial) Stacy H Mesaros Mailing Address 1304 234th Pl		Date of Receipt M M D D Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.29102
Des Moines FEC ID number of contributing federal political committee.	WA 98198	Amount of Each Receipt this Period 140.00 Biweekly P/R deduction of
Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	Occupation Administrator Aggregate Year-to-Date 400.00	20
Full Name (Last, First, Middle Initial) William Milianes	<u> </u>	Date of Receipt
Mailing Address 169 Sheridan Ave.		09 24 2008
City Ho Ho Kus	State Zip Code NJ 07423	Transaction ID: SA11AI.29104 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	121.17
Name of Employer HCR ManorCare Inc.	Occupation Executive Director	Biweekly P/R deduction of 17.31
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 225.03	
SUBTOTAL of Receipts This Page (optional)		453.42

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for	information copied from such Reports and Sir commercial purposes, other than using the AME OF COMMITTEE (In Full) ICR Manor Care PAC	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>Sr</u> M Ci <u>Li</u> fe	ull Name (Last, First, Middle Initial) cott Miller lailing Address 198 Old Mill Drive ity anghorne EC ID number of contributing ederal political committee. ame of Employer ICR ManorCare Inc.	State PA C		Date of Receipt 0 7 0 9 2 0 0 8 Transaction ID: SA11AI.29105 Amount of Each Receipt this Period 42.25 Biweekly P/R deduction of 42.25
	eceipt For: Primary General Other (specify)	Sr Admir Aggregate	nistrator e Year-to-Date ▼ 592.28	
. <u>M</u>	ull Name (Last, First, Middle Initial) Is Joylin Nation lailing Address 15985 Voyageurs Plac	ce		Date of Receipt 0 9 1 7 2 0 0 8
Ci	ity	State	Zip Code	Transaction ID: SA11AI.29112
<u> </u>	Vest Palm Beach	<u>FL</u>	33414	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		230.76 Biweekly P/R deduction of
N; H	ame of Employer ICR Manor Care, Inc.	Occupatio Senior A	ⁿ dministrator	38.46
Re	eceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		730.74	
	ull Name (Last, First, Middle Initial) avid K Nees			Date of Receipt
M	lailing Address 5315 Rymoor Drive			07 09 7 2008
	ity	State	Zip Code	Transaction ID: SA11AI.29113
FE	Sylvania EC ID number of contributing	OH C	43560	Amount of Each Receipt this Period 84.00
N	ame of Employer ICR. Manor Care, Inc	Occupatio	n e General Counsel	Biweekly P/R deduction of 84
Re	eceipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1176.00	
SUB	BTOTAL of Receipts This Page (optional) .	1		357.01

SCHEDULE A (FEC Form ITEMIZED RECEIPTS Any information copied from such Bend	Use separate schedule(s) for each category of the Detailed Summary Page orts and Statements may not be sold or used by any pers	FOR LINE NUMBER: PAGE 37 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than NAME OF COMMITTEE (In Full) HCR Manor Care PAC	using the name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial Linda Neumann Mailing Address 28 Roslyn Roa City Grosse Pointe Shor FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)		Date of Receipt M M M
Full Name (Last, First, Middle Initial Gordon C Ochs Mailing Address 2505 Waterfor City Palmetto FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)		Date of Receipt M M M O D D O D O D O D O D O D O D O D
Full Name (Last, First, Middle Initial Ms Leslie Ohm Mailing Address 12331 South 7 City Palos Heights FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify)		Date of Receipt M M M
SUBTOTAL of Receipts This Page (c	ptional)	957.98

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 66 (check only one) X 11a
A	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may n e name and addre	ot be sold or used by any pers ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms. Annette Orlowski			Date of Receipt
	Mailing Address 669 Highway 60 City	State	Zip Code	0 7 0 9 2 0 0 8 Transaction ID: SA11AI.29118
	Cedarburg	WI	53012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		57.90
	Name of Employer HCR.ManorCare, Inc.	Occupation Director, C	linical Services	Biweekly P/R deduction of 57.90
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 809.69	
	Full Name (Last, First, Middle Initial) Ann E Otley			Date of Receipt
	Mailing Address 333 W Wooster St			0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.29119
	Bowling Green	OH	43402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		115.00 Biweekly P/R deduction of
	Name of Employer HCR ManorCare Inc.	-, '	Corporate Benefits	40
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 570.00	
	Full Name (Last, First, Middle Initial) Mr. David Parker	1		Date of Receipt
	Mailing Address 2154 Tremont Road			09 17 2008
	City	State	Zip Code	Transaction ID: SA11AI.29120
	Columbus	OH	43212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		396.00
	Name of Employer HCR.ManorCare, Inc.		nt General Manager	Biweekly P/R deduction of 66
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 1249.66	
5	SUBTOTAL of Receipts This Page (optional) .		I	568.90

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any pe e name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Richard A Parr II Mailing Address 2253 Gray Fox Court City	State Zip Code	Date of Receipt M M
	Ann Arbor FEC ID number of contributing federal political committee.	MI 48103	Amount of Each Receipt this Period 576.25
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	Occupation VP - General Counsel & Secretary Aggregate Year-to-Date 3076.28	Biweekly P/R deduction of 192
	Full Name (Last, First, Middle Initial) Douglas M Parson Mailing Address 812 Countay Club Dr	ve	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.29122
	Butler	MO 64730	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	147.35 Biweekly P/R deduction of
	Name of Employer HCR ManorCare Inc.	Occupation Administrator	21.05
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 408.40	
_	Full Name (Last, First, Middle Initial) Deborah A Parziale		Date of Receipt
	Mailing Address 8850 Little Creek Roa	d	0 9 2 4 2 0 0 8
	City Reno	State Zip Code NV 89506	Transaction ID: SA11AI.29123 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	245.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Biweekly P/R deduction of 35
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00	
	SUBTOTAL of Receipts This Page (optional)	1	968.60

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 66 (check only one) X 11a
Ai	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Karen K Phelps Mailing Address Rt. 4^ Box 87p City Tecumseh FEC ID number of contributing federal political committee.	State Zip Code OK 74873	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Occupation Admin Dir Of Nursing Serv Aggregate Year-to-Date ▼ 420.00	Biweekly P/R deduction of 30
	Full Name (Last, First, Middle Initial) David III Pipkin Mailing Address 9211 Marydell Rd		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Ellicott City	State Zip Code MD 21042	Transaction ID: SA11AI.29129 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	Occupation Regional Director of Operation Aggregate Year-to-Date 949.16	Biweekly P/R deduction of 50.42
	Full Name (Last, First, Middle Initial) Clifton J Porter II		Date of Receipt
	Mailing Address 3929 Azalea Circle City	State Zip Code	0 9 1 7 2 0 0 8 Transaction ID: SA11AI.29130
	Maumee FEC ID number of contributing federal political committee.	OH 43537	Amount of Each Receipt this Period 379.62
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	Occupation AVP^ Government Relations Aggregate Year-to-Date 1188.21	Biweekly P/R deduction of 63.27
Γ,	SURTOTAL of Receipts This Page (optional)		712.14

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 66 (check only one) X 11a
or for o	commercial purposes, other than using the ME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
) HO	CR Manor Care PAC			
	ll Name (Last, First, Middle Initial) rgaret A Reitmeyer			Date of Receipt
Ma 	iling Address 13 Gregory Drive			09 17 2008
Cit	y envil	State NJ	Zip Code 07847	Transaction ID: SA11AI.29136
FE	C ID number of contributing leral political committee.	C	07047	Amount of Each Receipt this Period 210.00
	me of Employer CR Manor Care, Inc.	Occupation	n Director of Operations	Biweekly P/R deduction of 35
Re	ceipt For: Primary General Other (specify) ▼	, ' <u> </u>	e Year-to-Date ▼ 659.36	
	II Name (Last, First, Middle Initial) nn I Remenar			Date of Receipt
Ma	iling Address 2723 Rexton Ridge Ro	09 17 2008		
Cit	•	State	Zip Code	Transaction ID: SA11AI.29137
	oledo	OH	43617	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	C		526.16
Na HC	me of Employer CR ManorCare Inc.	Occupation VP Finar	n ncial Services	Biweekly P/R deduction of 188.46
Re	ceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2466.28	
	ll Name (Last, First, Middle Initial) mian M Rodgers			Date of Receipt
Ма	iling Address 4647 Calico Court			0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit		State	Zip Code	Transaction ID: SA11AI.29140
FE	Onclova C ID number of contributing leral political committee.	OH C	43542	Amount of Each Receipt this Period 74.00
Na HC	me of Employer CR Manor Care, Inc.	Occupation Legal Co		Biweekly P/R deduction of 37
Re	ceipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 427.10	
CLIET	FOTAL of Receipts This Page (optional)	<u> </u>		810.16

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(for each category of the Detailed Summary Page	(crieck offly offe)
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any ename and address of any political commit	person for the purpose of soliciting contributions tree to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Glen Roebuck Mailing Address 314 Forest Road City Davenport FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc.	State Zip Code IA 52803 C Occupation Regional Director of Operation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Receipt For: Primary General Other (specify) ▼	Regional Director of Operation Aggregate Year-to-Date ▼ 845.8	0
	Full Name (Last, First, Middle Initial) David R Roth Mailing Address 5257 Bentwood Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.29143
	Mason	OH 45040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	22.00 Biweekly P/R deduction of
	Name of Employer HCR ManorCare Inc.	Occupation Director Of Planning	22
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 308.0	0
_	Full Name (Last, First, Middle Initial) Lynette M Rugg		Date of Receipt
	Mailing Address 1348 Oakland Circle		0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City N. Aurora	State Zip Code IL 60542	Transaction ID: SA11AI.29144
	FEC ID number of contributing federal political committee.	C 00342	Amount of Each Receipt this Period 152.82
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Biweekly P/R deduction of 25.47
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 476.7	3
	SUBTOTAL of Receipts This Page (optional) .	1	461.62

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 1
\	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
 	Full Name (Last, First, Middle Initial) Richard G Rump Mailing Address 2423 Heather Glen Dr City Maumee FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc.	State Zip Code OH 43537 C	Date of Receipt M M
	Receipt For: Primary General Other (specify)	Dir^ Corporate Communication Aggregate Year-to-Date ▼ 938.98	
	Full Name (Last, First, Middle Initial) Cynthia S Scharp Mailing Address 1627 N. 1100 E		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.29148
	Gilman FEC ID number of contributing federal political committee.	IL 60938	Amount of Each Receipt this Period 140.00
	Name of Employer HCR ManorCare Inc.	Occupation Sr Administrator	Biweekly P/R deduction of 20
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
_	Full Name (Last, First, Middle Initial) Bruce G Schroeder		Date of Receipt
	Mailing Address 10945 Lakeview Dr		07 09 2008
	City	State Zip Code	Transaction ID: SA11AI.29149
	Whitehouse FEC ID number of contributing federal political committee.	OH 43571	Amount of Each Receipt this Period 60.00
	Name of Employer HCR ManorCare Inc.	Occupation AVP Home Health	Biweekly P/R deduction of 60
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1	496.52

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ny information copied from such Reports and some for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements made name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr. Mark Schroepfer Mailing Address 2328 Bonnie Brae City Santa Ana FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc.	State CA C		Date of Receipt M M
	Receipt For: Primary General Other (specify) ▼	Administ Aggregate	Year-to-Date ▼ 375.00	
	Full Name (Last, First, Middle Initial) Mr. Edward Schuch Mailing Address 304 Adriana Court			Date of Receipt 0 9 1 7 2 0 0 8
	City	State	Zip Code	Transaction ID: SA11AI.29151
	Northhampton	PA	18067	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		186.12 Biweekly P/R deduction of
	Name of Employer HCR Manor Care, Inc.	Occupatio Administ	rator	31.02
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		538.26	
	Full Name (Last, First, Middle Initial) Susan Sexton			Date of Receipt
	Mailing Address 7645 Yawberg Road			09 / 17 / 2008
	City	State	Zip Code	Transaction ID: SA11AI.29154
	Whitehouse FEC ID number of contributing federal political committee.	ОН	43571	Amount of Each Receipt this Period 202.56
	Name of Employer HCR Manor Care, Inc.	Occupatio Senior M	n lanager - Tax	Biweekly P/R deduction of 34.54
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 636.37	
	SUBTOTAL of Receipts This Page (optional) .	1		503.68

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	P HCR Manor Care PAC Full Name (Last, First, Middle Initial)			
•	Katie Slench Mailing Address 7492 E Plank Trail Ct			Date of Receipt
	City	State	Zip Code	07 16 2008 Transaction ID: SA11Al.29158
	<u>Frankfort</u>	IL	60423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer HCR Manor Care, Inc.	Occupation Reg Resid	n dent Assessment Coordina	Biweekly P/R deduction of 15 torl
	Receipt For: Primary General Other (specify) ▼	, ' 	Year-to-Date ▼ 225.00	
	Full Name (Last, First, Middle Initial) Bridgid R Slivken			Date of Receipt
	Mailing Address 935 Burns Ave NE			07 / 30 / Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.29159
	Cincinnati	OH	45215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		76.14
	Name of Employer HCR Manor Care, Inc	Occupation Administr		Biweekly P/R deduction of 25.38
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 228.42	
_	Full Name (Last, First, Middle Initial) Theresa J Smelser			Date of Receipt
	Mailing Address 202 N. Elm Hurst Rd.			09 / 17 / 2008
	City	State	Zip Code	Transaction ID: SA11AI.29160
	Prospect Heights	<u>IL</u>	60070	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		190.50 Biweekly P/R deduction of
	Name of Employer HCR ManorCare Inc.	Occupation Sr Admin		31.75
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 682.95	
	SUBTOTAL of Receipts This Page (optional)	1		296.64

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
An	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pe name and address of any political committe	erson for the purpose of soliciting contributions ee to solicit contributions from such committee.
	HCR Manor Care PAC		
	Full Name (Last, First, Middle Initial) Dean A Smith		Date of Receipt
	Mailing Address 5918 Johnson Street		09 24 2008
	City	State Zip Code	Transaction ID: SA11AI.29161
	Cantonsville	MD 21228	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	180.18
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Biweekly P/R deduction of 25.74
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	506.19	0
	Full Name (Last, First, Middle Initial) Joyce Louise Smith	<u> </u>	Date of Receipt
	Mailing Address 3521 Cedar Creek Co	0 9 1 7 2 0 0 8	
	City	State Zip Code	Transaction ID: SA11AI.29162
	Maumee	OH 43537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	951.90
	Name of Employer HCR ManorCare Inc.	Occupation VP^ Clinical Services	Biweekly P/R deduction of 158.65
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1269.20	
	Full Name (Last, First, Middle Initial) Patricia Jane Stahr		Date of Receipt
	Mailing Address 807 Johnston Drive		07 09 7 2008
	City	State Zip Code	Transaction ID: SA11AI.29165
	Bethlehem	PA 18017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	6.97
	Name of Employer HCR ManorCare Inc.	Occupation Admin Dir Of Nursing Serv	Biweekly P/R deduction of 6.97
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	297.58	
			1139.05

ITE	HEDULE A (FEC Form 3X) EMIZED RECEIPTS information copied from such Reports and St	tatomente ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or fo	NAME OF COMMITTEE (In Full) HCR Manor Care PAC	name and add	dress of any political committee to	os solicit contributions from such committee.
۸. <u>/</u>	Full Name (Last, First, Middle Initial) Anthony J Stinson Mailing Address 3 Lynnefield Court			Date of Receipt 0 8 1 3 2 0 0 8
	Dity	State	Zip Code	Transaction ID: SA11AI.29168
F	Medford FEC ID number of contributing ederal political committee.	NJ C	08055	Amount of Each Receipt this Period 134.84
_	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	Occupation Administ Aggregate		Biweekly P/R deduction of 33.71
B. <u>F</u>	Full Name (Last, First, Middle Initial) Rami Ubaydi Mailing Address 27134 Pumpkin Street			Date of Receipt 0 9 1 7 2 0 0 8
Ċ	Dity	State	Zip Code	Transaction ID: SA11AI.29172
1	Murrieta	CA	92562	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	С		142.25 Biweekly P/R deduction of
- -	Name of Employer HCR Manor Care, Inc. Receipt For:	_ '	Director of Operations Year-to-Date ▼	50
·	Primary General Other (specify) ▼	Aggregate	692.28	
	Full Name (Last, First, Middle Initial) John L Waller Mailing Address 822 Raleigh Court			Date of Receipt
_				09 17 2008
	Dity Gastonia	State NC	Zip Code 28054	Transaction ID: SA11AI.29176 Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.	C	20007	140.28
_	Name of Employer HCR Manor Care, Inc.	Occupation AVP of C	n Hinical Services	Biweekly P/R deduction of 23.38
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.42	
SII	BTOTAL of Receipts This Page (optional)			417.37

SCHEDULE A (FEC Form STEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) Cynthia A Walter		Date of Receipt
Mailing Address 1860 White Oak	Drive	07 09 7 2008
City	State Zip Code	Transaction ID: SA11AI.29177
Sinking Spring FEC ID number of contributing	PA 19608	Amount of Each Receipt this Period 20.00
federal political committee.	C	
Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Biweekly P/R deduction of 20
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	280.00	
Full Name (Last, First, Middle Initial) Mr. Douglas Wanke	I	Date of Receipt
Mailing Address 13908 Pondview	Road	07 09 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.29178
Silver Spring	MD 20905	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	55.00
Name of Employer HCR.ManorCare, Inc.	Occupation Director of Health Planning	Biweekly P/R deduction of 55
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	770.00	
Full Name (Last, First, Middle Initial) Kim M Ward	L	Date of Receipt
Mailing Address 2414 Greendale	Road	08 20 YYYY 20 2008
City	State Zip Code	Transaction ID: SA11AI.29179
Wilmington FEC ID number of contributing	DE 19810	Amount of Each Receipt this Period
federal political committee.	O	
Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Biweekly P/R deduction of 30.29
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	514.93	
	nal)	196.16

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16
A	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	HCR Manor Care PAC		
-	Full Name (Last, First, Middle Initial) Susan Ward		Date of Receipt
	Mailing Address 12 Arapaho	Chata 7'- Cada	07 10 2008
	City Shawnee	State Zip Code OK 74801	Transaction ID: SA11AI.29180 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.50
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Weekly P/R deduction of 19.25
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 538.48	
_	Full Name (Last, First, Middle Initial) Candy L White		Date of Receipt
	Mailing Address 3514 Sylvan Lane		07 23 2008
	City	State Zip Code	Transaction ID: SA11AI.29184
	Peoria FEC ID number of contributing federal political committee.	IL 61615	Amount of Each Receipt this Period 50.00
	Name of Employer HCR ManorCare Inc.	Occupation Administrator	Biweekly P/R deduction of 25
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Robert Wilcox		Date of Receipt
	Mailing Address 5208 Dry Wells Rd		08 20 2008
	City Austin	State Zip Code TX 78749	Transaction ID: SA11AI.29185 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	69.18
	Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Operation	Biweekly P/R deduction of 17.31
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 294.21	
Γ,	SURTOTAL of Receipts This Page (optional)		157.68

ITEMIZED RECEIPTS	,	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may	not be sold or used by any person	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	ne name and add	ress of any pointed committee to	y solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Toni Y Williams			Date of Receipt
Mailing Address 141 Boiling Spring C	Gir		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11Al.29186
Southern Pines	NC	28387	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.80
Name of Employer HCR ManorCare Inc.	Occupation Admin Dir	r Of Nursing Serv	Biweekly P/R deduction of 34.80
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 382.80	
Full Name (Last, First, Middle Initial) Dan Wood			Date of Receipt
Mailing Address 844 Miami Street			07 09 7 2008
City	State	Zip Code	Transaction ID: SA11AI.29189
Toledo	OH	43605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		63.60
Name of Employer HCR ManorCare Inc.	Occupation Asst Gene		Biweekly P/R deduction of 63.60
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	890.40	
Full Name (Last, First, Middle Initial) Ms Sherriann Wood			Date of Receipt
Mailing Address 5 Aberfield Lane			09 17 2008
City	State	Zip Code	Transaction ID: SA11AI.29190
Miamisburg	OH	45342	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		176.82
Name of Employer HCR.ManorCare, Inc.	Occupation RDO - Ce	entral Division Region 2	Biweekly P/R deduction of 29.47
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	695.93]
	1		449.22

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for e	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 51 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 11
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	tatements may not be name and address of	sold or used by any perso any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
. ∠	Full Name (Last, First, Middle Initial) Julie A Yoxtheimer Mailing Address 249 E Pearl St City	State Zip	Code	Date of Receipt M M
	Findlay FEC ID number of contributing federal political committee.	C	840	Amount of Each Receipt this Period 72.00 Biweekly P/R deduction of
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Occupation Sr Reimbursem Aggregate Year-to		12
3.	Full Name (Last, First, Middle Initial) Cynthia M Zalewski Mailing Address 3845 Drummond Rd			Date of Receipt 0 7 0 9 2 0 0 8
	City Toledo		Code 613	Transaction ID: SA11AI.29195 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		36.74 Biweekly P/R deduction of
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Occupation Senior Attorney Aggregate Year-to	-Date ▼ 514.36	36.74
	Full Name (Last, First, Middle Initial) Daniel A Zawadzki Mailing Address 18910 Mallard Cove			Date of Receipt
	City	State Zip	Code	07 23 2008 Transaction ID: SA11AI.29196
	Middleburg Heights	OH 44	130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.92
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator		Biweekly P/R deduction of 14.46
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	-Date ▼ 216.38	
	SUBTOTAL of Receipts This Page (optional)		·····	137.66
	TOTAL This Period (last page this line number	only)		24639.99

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 66 (check only one) 11a 11b 11c 12 13 14 15 16 7
any information copied from such Reports and r for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions
HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) The Huntington National Bank Mailing Address P.O. Box 5065		Date of Receipt
	7: 0.1	07 31 2008
City Cleveland	State Zip Code OH 44101-0065	Transaction ID: SA17.28877 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	24.57
Name of Employer	Occupation	Interest Payment - 0708
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 205.20	
Full Name (Last, First, Middle Initial) The Huntington National Bank Mailing Address P.O. Box 5065		Date of Receipt
		08 29 2008
Claveland	State Zip Code OH 44101-0065	Transaction ID: SA17.28878
Cleveland FEC ID number of contributing federal political committee.	OH 44101-0065	Amount of Each Receipt this Period 23.93
Name of Employer	Occupation	Interest Payment - 0808
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 229.13	
Full Name (Last, First, Middle Initial) The Huntington National Bank		Date of Receipt
Mailing Address P.O. Box 5065		0 9 3 0 2 0 0 8
City	State Zip Code	Transaction ID: SA17.28879
Cleveland	OH 44101-0065	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.13
Name of Employer	Occupation	Interest Payment - 0908
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 249.26	
SUBTOTAL of Receipts This Page (optional	· ·	68.63
, 3 (4)		68.63

В.

C.

SCHEDULE B (FEC Form 3X)		arate schedule(s)			OR LIN		R:		PA	AGE	53 /	3 / 66		
ITEMIZED DISBURSEMENTS		category of the Summary Page		Š	_	22 28a	П	23 28b	24 28c		25 29	26 30b		
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam												<u> </u>		
NAME OF COMMITTEE (In Full) HCR Manor Care PAC														
Full Name (Last, First, Middle Initial) The Huntington National Bank						Date of	of D	isburse	SB21		9428 20 0 8	Y		
Mailing Address P.O. Box 5065														
City Cleveland	State OH	Zip Code 44101-0065				Amou	nt o	f Each	Disburse	emen				
Purpose of Disbursement Credit Card Fees - Suriano						L.	_			_	0.3	3		
Candidate Name					egory/ rpe									
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General												
Full Name (Last, First, Middle Initial) The Huntington National Bank						Date o		on ID:	SB21		9430 0 0 8	Y		
Mailing Address P.O. Box 5065						0 7		L	5		008	5		
City Cleveland	State OH	Zip Code 44101-0065				Amou	nt o	f Each	Disburse	emen	t this f	Period		
Purpose of Disbursement Service Fees - 0708						L.					44.7	9		
Candidate Name					egory/ vpe									
Office Sought: Senate President State: Disburse	ement For: Primary Other (spe	General ♥												
Full Name (Last, First, Middle Initial)						Trans	acti	on ID:	SB21	B.29	9432			
The Huntington National Bank						М	of Di	isburse	D / D	/ ` Y	Y	Υ		
Mailing Address P.O. Box 5065						0 8		1	5 /	. 2	0 0 8	3		
City Cleveland	State OH	Zip Code 44101-0065				Amou	nt o	f Each	Disburse	men	t this f	Period		
Purpose of Disbursement Service Fees - 0808			Г			L.					43.1	7		
Candidate Name					egory/ rpe									
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General ecify) ▼												
State: District:		•												
SUBTOTAL of Disbursements This Page (optional)					. •						88.29	9		

TOTAL This Period (last page this line number only)

State:

A.

SCHEDULE B (FEC Form 3X)

District:

FOR LINE NUMBER: PAGE 54/66 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 21b 22 23 26 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **HCR Manor Care PAC** Full Name (Last, First, Middle Initial) Transaction ID: SB21B.29434 The Huntington National Bank Date of Disbursement 15 0 9 2008 Mailing Address P.O. Box 5065 City State Zip Code Amount of Each Disbursement this Period Cleveland OH 44101-0065 42.72 Purpose of Disbursement Service Fees - 0908 Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify)

SUBTOTAL of Disbursements This Page (optional)	•	42.72
TOTAL This Period (last page this line number only)		131.01

5 (HEDULE	B (FEC Form	3 ^) U	se sepa	arate schedule(s)	١ .	FOR LI		-	1:		PAG	E 55/	66
ITI	EMIZED DI	SBURSEMEN	ITS fo	r each	category of the Summary Page		(check 21b 27	Ć	ne) 22 28a	X 23	ь	24 28c	25 29	
		ed from such Reports rposes, other than usi												S
\(\)	NAME OF COM HCR Manor C	MITTEE (In Full)	ng the hame and	addre	ss or any ponnica	COIIII	THILLEG IC	Solici	COILLI	butions	10115	ucii coi		
	•	First, Middle Initial) ER FOR US SENA	ATE								ID: S	B23.28	3918	
	Mailing Address	5950 S Willow	Drive						0 9	/ [^D 3 0	/ Y	ž 0 ŏ 8	8 ^Y
	City Englewood		State CO		Zip Code 80111				Amoui	nt of Ea	ch Dist		ent this I	
		event held on 10/07/08	3									•	3000.0	0
	Candidate Name ROBERT W S	CHAFFER	.			ı	tegory/ ype							
	Office Sought:	House X Senate President		mary	2008 X General ecify) ▼									
	•	District: 00 First, Middle Initial) CONGRESS.CON	1					- 1				B23.28	3888	
	Mailing Address	P.O.Box 2106							0 7		D 2 4	1 ι / Υ	ž 0 0 8	3 ^Y
	City Montgomery		State AL		Zip Code 36102				Amoui	nt of Ea	ch Dist	ourseme	ent this I	Perio
	Purpose of Disbu Contribution	ursement						1					1000.0	0
	Candidate Name BOBBY NEAL	MR. SR. BRIGHT					tegory/ ype							
	Office Sought: State: AL	X House Senate President District: 02		mary	2008 X General ecify) V									
	Full Name (Last,	First, Middle Initial) OR SENATE 08									ID: S	B23.28	3904	
	Mailing Address	680 TRANSFE	R ROAD SUIT	E A					0 9	1 /	05	/ Y	ž 0 ŏ 8	3 ^Y
	City ST PAUL		State MN		Zip Code 55114				Amoui	nt of Ea	ch Dist		ent this I	
		event held on 09/16/08	}										1500.0	0
	Candidate Name NORM COLEI	MAN	1				tegory/ ype	-						
	Office Sought:	House	Disbursemen	t For: mary	2008 General									
		X Senate President		er (spe	ecify) 🔻									

IT	CHEDULE B (FEC Form 3	Use sep	arate schedule(s)	FOR LINE	
	EMIZED DISBURSEMEN	TS for each	category of the Summary Page	(check only	7 one) 22
	y Information copied from such Reports a for commercial purposes, other than usin			d by any person f	or the purpose of soliciting contributions
$\sum_{i=1}^{3}$	NAME OF COMMITTEE (In Full) HCR Manor Care PAC	g the name and addre	ss of any pointed	Committee to so	ion contributions from such committee
<u>/</u>	Full Name (Last, First, Middle Initial) COLEMAN FOR SENATE 08				Transaction ID: SB23.28905 Date of Disbursement
	Mailing Address 680 TRANSFEF	R ROAD SUITE A			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 5 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix} $
	City ST PAUL	State MN	Zip Code 55114		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution for event held on 09/16/08				2000.00
	Candidate Name NORM COLEMAN	Disbursement For:	2008	Category/ Type	
	Office Sought: House X Senate President State: MN District: 00	Primary Other (sp	X General		
	Full Name (Last, First, Middle Initial) ELIZABETH DOLE COMMITTEE	INC			Transaction ID: SB23.28909 Date of Disbursement
	Mailing Address PO BOX 2918				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 8 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Q & N \\ Z & O & O & 8 \end{smallmatrix} \end{bmatrix}$
	City RALEIGH	State NC	Zip Code 27602		Amount of Each Disbursement this Period
	Purpose of Disbursement				2000.00
	Contribution for event held on 09/22/08				
	Contribution for event held on 09/22/08 Candidate Name ELIZABETH DOLE			Category/ Type	
	Candidate Name ELIZABETH DOLE Office Sought: House X Senate President	Disbursement For: Primary Other (sp.	2008 X General ecify) ▼		
	Candidate Name ELIZABETH DOLE Office Sought: House X Senate	Primary	X General		Transaction ID: SB23.28896 Date of Disbursement
	Candidate Name ELIZABETH DOLE Office Sought: House	Primary	X General		
	Candidate Name ELIZABETH DOLE Office Sought: House	Primary	X General		Date of Disbursement M 7 M / D 2 A / Y 2 0 0 8 Y Amount of Each Disbursement this Perio
	Candidate Name ELIZABETH DOLE Office Sought: House	Primary Other (sp	X General ecify) ▼ Zip Code	Type	Date of Disbursement O 7
	Candidate Name ELIZABETH DOLE Office Sought: House	Primary Other (spi	X General ecify) Zip Code 13214		Date of Disbursement M 7 M / D 2 A / Y 2 0 0 8 Y Amount of Each Disbursement this Period
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Full Name (Last, First, Middle Initial) FRIENDS OF GLENN THOMPSON							Trans Date				SB2 ment	3.28	903	
Mailing Address 198 PARK ROAD							0 ^M 8	М	/	^D 2	^D /	Y	žoŏ	8 ^Y
City HOWARD	State PA	Zip Code 16841					Amou	unt c	of Ea	ach	Disbui	seme	nt this	Perio
Purpose of Disbursement Contribution				v			L.				_	1	000.0	0
Candidate Name GLENN THOMPSON				atego Type	-									
Office Sought: X House Senate President Disb	ursement For: Primary Other (spe	2008 X General		712										
State: PA District: 05		<i>→</i> , ▼												
Full Name (Last, First, Middle Initial) FRIENDS OF GORDON SMITH							Trans Date				SB2 ment	3.28	899	
Mailing Address 228 S WASHINGTON	N STE 115						0 ^M 8	М	′	^D 1	3 /	Y	žoŏ	8 ^Y
City ALEXANDRIA	State VA	Zip Code 22314					Amou	unt c	of Ea	ach	Disbui	seme	nt this	Perio
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Full Name (Last, First, Middle Initial) FRIENDS OF JAY ROCKEFELLER							Date	of D		ırse		3.28	917	
Mailing Address PO BOX 1909							0 _M 9	М	L	^D 2	2 /	Y	žοŏ	8 ^Y
City CHARLESTON	State WV	Zip Code 25327				\dagger	Amou	unt c	of Ea	ach	Disbui	seme	nt this	Peric
Purpose of Disbursement Contribution for event held on 09/25/08			Г				L.		-			2	2500.0	0
Candidate Name JOHN DAVISON IV ROCKEFELLER				atego Type										
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State: WV District: 00	Other (spe	eciiy) ♥												

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Mailing A	ddress	PO BOX 563						0 ^M 7		24	ž	0 0 8
City MERRII				State VA	Zip Code 22116			Amour	nt of Eac	h Disburs		
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Candidat GERRY						Category Type	//					
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Candidat	e Name	RIFFITH				Category Type	//					
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Mailing A	ddress	PO Box 176						0 ^M 7	/ D	2 4 /	ž	0 0 8
City Crete				State IL	Zip Code 60417			Amour	nt of Eac	h Disburs	sement	this Pe
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Cit	ty HOENIX			tate	Zip Code 85064				Am	ount	of Ea	ch Disl	burse	ment	this F	Perio
	urpose of Disbu	ursement event held on 09/23/08				Г	v							25	00.00	0
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	ffice Sought:	House X Senate President District: 00		nent For: Primary Other (spe	2008 X General ecify) V				-							
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Ma	ailing Address	PO Box G							0	7 ^M	′	24	/ Y	ž	ο ὁ ε	3 ^Y
Cit	ty agstaff			tate	Zip Code 86002				Am	ount	of Ea	ch Disl	burse	ment	this F	Perio
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	andidate Name NN KIRKPAT	RICK					atego Type	•								
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ITEMIZED D	B (FEC Form 3)	Use separate	schedule(s)	_	E NUMBER: PAGE 60 / 66
_	ISBURSEMENT		gory of the ((check on 21b 27	ly one) 22 X 23 24 25 2 28a 28b 28c 29
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·	MMITTEE (In Full)	The mame and address of	arry political c	ommittee to st	Jick Contributions from Such Committee
,	t, First, Middle Initial) ADER FOR CONGRE	SS			Transaction ID: SB23.28894 Date of Disbursement
Mailing Address	2525 N. Baker Dr	ive			$\begin{bmatrix} 0 & 7 & M $
City Canby			p Code 7013		Amount of Each Disbursement this Period
Purpose of Disk					1000.00
Candidate Nam KURT SCHR	ADER			Category/ Type	
Office Sought:	X House Senate President	Disbursement For: Primary Other (specify)	2008 X General) ▼		
State: OR Full Name (Las: MARTIN HEI	District: 05 t, First, Middle Initial) NRICH				Transaction ID: SB23.28892 Date of Disbursement
Mailing Address	2118 CENTRAL	AVENUE SE #71			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
City ALBUQUERO	QUE		p Code 7106		Amount of Each Disbursement this Perio
Purpose of Disk Contribution	oursement				2000.00
Candidate Nam MARTIN HEI				Category/ Type	
	y Herre	Disbursement For:	2008		
Office Sought:	X House Senate President	Primary Other (specify)	X General) ▼		
State: NM	Senate President District: 01 t, First, Middle Initial)	Primary			Transaction ID: SB23.28912 Date of Disbursement
State: NM Full Name (Las	Senate President District: 01 t, First, Middle Initial) R ENGLISH	Primary			
State: NM Full Name (Last	Senate President District: 01 t, First, Middle Initial) R ENGLISH	Primary Other (specify) State Zip			Date of Disbursement M M M D D D Y Y Y Y O Y 8 Amount of Each Disbursement this Period
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State: NM Full Name (Last PEOPLE FOI Mailing Address City ERIE Purpose of Disk	Senate President District: 01 t, First, Middle Initial) R ENGLISH PO BOX 1940 Dursement event held on 09/17/08	Primary Other (specify) State Zip	p Code	Category/ Type	Date of Disbursement M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
State: NM Full Name (Last PEOPLE FOID Mailing Address City ERIE Purpose of Disk Contribution for Candidate Name	Senate President District: 01 t, First, Middle Initial) R ENGLISH PO BOX 1940 Dursement event held on 09/17/08 e IGLISH	Primary Other (specify) State Zip	p Code 6507 2008 X General		Date of Disbursement M 9 M / D 1 D / Y 2 0 0 8 Y Amount of Each Disbursement this Perior

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SCHEDULE B (FEC FOIIII 3X)		arate schedule(s)			OR LINE neck onl	NUMBE	R:		Р	AGE	61 / 6	6
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or for commercial purposes, other than using the	name and addre	ess of any political	con	nmit	tee to so	licit conti	ributi	ions fro	m such	comn	nittee	
NAME OF COMMITTEE (In Full)												
HCR Manor Care PAC												
Full Name (Last, First, Middle Initial)									SB23	.294	58	
SENATE MAJORITY FUND							of Di	isburse	ement	v v	V -	V
Mailing Address P.O. Box 32025						0 9		1	0	2	0 0 8	
City Phoenix	State AZ	Zip Code 85064				Amou	ınt o	f Each	Disburs	emen	t this P	erio
Purpose of Disbursement	,,,_	1			-					50	00.00)
Breakfast event held on 09/23/2008			L									
Candidate Name				atec Typ	ory/ e							
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Senate President	Primary Other (sp	X General ecify) ▼										
State: District:	- (7)	<i>-,</i> ▼										
Full Name (Last, First, Middle Initial)									SB23	.289	07	
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Mailing Address PO BOX 500						0 9		_ 0	8 /	2	0 0 8	
City RYE	State NH	Zip Code 03870				Amou	int o	f Each	Disburs	emen	t this P	erio
Purpose of Disbursement Contribution for event held on 09/17/08		-						-		20	00.00)
Candidate Name JOHN E SUNUNU				ateg Typ	jory/ e							
χ Senate	oursement For:	2008 X General										
President State: NH District: 00	Other (sp	ecity) 🔻										
Full Name (Last, First, Middle Initial) TIM RYAN FOR CONGRESS								on ID:	SB23	3.289	15	
Mailing Address 1600 Roosevelt Aver Suite 804	nue					0 9	М	/ 1	D /	Y Y	0 ŏ 8	Y
City Niles	State OH	Zip Code 44446				Amou	int o	f Each	Disburs	emen	t this P	erio
Purpose of Disbursement Contribution for event held on 09/13/08	OH	77740	Г	0						10	00.00)
Candidate Name TIMOTHY J RYAN				atec Typ	jory/							
Senate President	oursement For: Primary Other (sp	2008 X General ecify)										
State: OH District: 17												
SUBTOTAL of Disbursements This Page (option	onal)									80	00.00	
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29			
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full) HCR Manor Care PAC						
Full Name (Last, First, Middle Initial) UDALL FOR COLORADO INC			Transaction ID: SB23.28919 Date of Disbursement			
Mailing Address 8690 Wolff Court #200			09 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
City Westminster	State Zip Code CO 80031		Amount of Each Disbursement this Period			
Purpose of Disbursement Contribution for event held on 10/07/08			2500.00			
Candidate Name MARK E UDALL	ement For: 2008	Category/ Type				
Office Sought: House Disburse X Senate President State: CO District: 00	Primary X General Other (specify)					
Full Name (Last, First, Middle Initial) UDALL FOR US ALL			Transaction ID: SB23.28886 Date of Disbursement			
Mailing Address 3311 CANDELARIA NE	SUITE A		07 18 7 2008			
City ALBUQUERQUE	State Zip Code NM 87107		Amount of Each Disbursement this Perio			
Purpose of Disbursement Contribution for event held on 08/06/08			2000.00			
Candidate Name TOM UDALL		Category/ Type				
Office Sought: X House Disburse Senate President State: NM District: 03	ement For: 2008 Primary X General Other (specify)					
Full Name (Last, First, Middle Initial) WICKER FOR SENATE			Transaction ID: SB23.28906 Date of Disbursement			
Mailing Address PO BOX 64			09 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
City JACKSON	State Zip Code MS 39205		Amount of Each Disbursement this Period			
Purpose of Disbursement Contribution for event held on 09/10/08			5000.00			
Candidate Name ROGER F WICKER		Category/ Type				
Office Sought: House Disburse X Senate President State: MS District: 00	ement For: 2008 Primary X General Other (specify)					
SUBTOTAL of Disbursements This Page (optional)			9500.00			
			44500.00			

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<u>V.</u>	NAME OF COMMITTEE (In Full)	TIC UTIC GOOT CO	oo or arry portious		ion contributions from such committee
\rangle	HCR Manor Care PAC				
	Full Name (Last, First, Middle Initial)				Transaction ID: SB29.28913
	Citizens for Gardner Committee				Date of Disbursement
	Mailing Address 431 N. Prospect St.				09 10 7 2008
	City Bowling Green	State OH	Zip Code 43402		Amount of Each Disbursement this Period
	Purpose of Disbursement		43402		1000.00
	Contribution for event held on 09/12/08				
	Candidate Name			Category/ Type	
	Office Sought: House Disbur	sement For:		1,700	
	Senate	Primary	General		
	State: President State:	Other (spe	ecify)		
	Full Name (Last, First, Middle Initial)				Transaction ID: SB29.28898
	Committee to Elect Bill Harris				Date of Disbursement
	Mailing Address 1238 Township Road 1	506			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
	City Ashland	State OH	Zip Code 44805		Amount of Each Disbursement this Period
	Purpose of Disbursement		44003		2500.00
	Contribution Candidate Name			Optomory	
	Candidate Name			Category/ Type	
	- I	sement For:			
	Senate President	Other (spe	General		
	State: District:	Other (spe	City) \		
	State: District: Full Name (Last, First, Middle Initial)	Other (spe	▼		Transaction ID: SB29.28902
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	State: District: Full Name (Last, First, Middle Initial)	Other (spe	₩		
	State: District: Full Name (Last, First, Middle Initial) Committee to Re-Elect Joe Manchin	State WV	Zip Code 25361		Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State: District: Full Name (Last, First, Middle Initial) Committee to Re-Elect Joe Manchin Mailing Address P.O. Box 5202 City Charleston Purpose of Disbursement	State	Zip Code		Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State: District: Full Name (Last, First, Middle Initial) Committee to Re-Elect Joe Manchin Mailing Address P.O. Box 5202 City Charleston	State	Zip Code	Category/	Date of Disbursement M M M / D 1 9 / Y 2 0 0 8 Y Amount of Each Disbursement this Period
	State: District: Full Name (Last, First, Middle Initial) Committee to Re-Elect Joe Manchin Mailing Address P.O. Box 5202 City Charleston Purpose of Disbursement Contribution for Governor Candidate Name	State WV	Zip Code	Category/ Type	Date of Disbursement M M M / D D D / Y Y O O B Y Amount of Each Disbursement this Period
	State: District: Full Name (Last, First, Middle Initial) Committee to Re-Elect Joe Manchin Mailing Address P.O. Box 5202 City Charleston Purpose of Disbursement Contribution for Governor Candidate Name	State	Zip Code		Date of Disbursement M M M / D D D / Y Y O O B Y Amount of Each Disbursement this Period
	State: District: Full Name (Last, First, Middle Initial) Committee to Re-Elect Joe Manchin Mailing Address P.O. Box 5202 City Charleston Purpose of Disbursement Contribution for Governor Candidate Name Office Sought: House Senate President	State WV	Zip Code 25361		Date of Disbursement M M M / D D D / Y Y O O B Y Amount of Each Disbursement this Period
	State: District: Full Name (Last, First, Middle Initial) Committee to Re-Elect Joe Manchin Mailing Address P.O. Box 5202 City Charleston Purpose of Disbursement Contribution for Governor Candidate Name Office Sought: House Senate	State WV sement For:	Zip Code 25361		Date of Disbursement M 8 M / D 1 9 / Y 2 0 0 8 Y Amount of Each Disbursement this Period

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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	—	22 23 28a 28b	24 25 28c X 29
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HCR Manor Care PAC				
Full Name (Last, First, Middle Initial) Friends of Martin O'Malley			Date of Disburse	
Mailing Address 218 East Lexington Strategy Suite 602	reet		0 7 1	5 7 2008
City Baltimore	State Zip Code MD 21202		Amount of Each	Disbursement this Period
Purpose of Disbursement Governor Fundraiser on 07/22/2008		• •		4000.00
Candidate Name		Category/ Type		
Office Sought: House Disbute Senate President State: District:	ursement For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial)			Transaction ID:	SB29.28897
Friends of Roger Kahn for Senate			Date of Disburse	ement
Mailing Address P.O. Box 1627				1 2008
City Saginaw	State Zip Code MI 48605		Amount of Each	Disbursement this Period
Purpose of Disbursement State Fundraiser on 10/08/2008		•		1000.00
Candidate Name		Category/ Type		
Office Sought: House Disbute Senate President State: District:	ursement For: Primary General Other (specify) ▼	•		
Full Name (Last, First, Middle Initial) Friends of Tom Patton			Transaction ID: Date of Disburse	ement
Mailing Address 17157 Rabbit Run Dri	ve		08 / 1	9 7 2008
City Strongsville	State Zip Code OH 44136		Amount of Each	Disbursement this Period
Purpose of Disbursement Contribution				1500.00
Candidate Name		Category/ Type		
Senate President	ursement For: Primary General Other (specify) ▼			
State: District:				

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ITEMIZED DISBURSEMENT	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28a 28b 28c X 29
Any Information copied from such Reports a or for commercial purposes, other than usin		ed by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
Full Name (Last, First, Middle Initial) NEW HAMPSHIRE REPUBLICAN	I STATE COMMITTEE		Transaction ID: SB29.28908 Date of Disbursement
Mailing Address 10 Water Street			$ \begin{bmatrix} M & M \\ 0 & 9 \end{bmatrix} \begin{bmatrix} & D & D \\ 0 & 8 \end{bmatrix} \begin{bmatrix} & Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix} $
City Concord	State Zip Code NH 03301		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution			5000.00
Candidate Name		Category/ Type	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB29.28916
O'Connor for Supreme Court			Date of Disbursement
Mailing Address 100 E. Broad St Suite 2330	reet		$ \begin{bmatrix} M & M \\ 0 & 9 \end{bmatrix} \begin{bmatrix} & & & & & & & & & & & & & & & & & & &$
City Columbus	State Zip Code OH 43215		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution			500.00
Candidate Name		Category/ Type	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) REPUBLICAN PARTY OF KENTU	JCKY		Transaction ID: SB29.28911 Date of Disbursement
Mailing Address PO BOX 1068			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ O & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & O \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Y \\ Y & Z & O & Q & S \end{bmatrix}$
City FRANKFORT	State Zip Code KY 40602		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution			5000.00
Candidate Name		Category/ Type	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District:			

A.

В.

District:

14go# 200001 10000		
SCHEDULE B (FEC Form 3X)		DR LINE NUMBER: PAGE 66 / 66
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	heck only one) 21b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam		
NAME OF COMMITTEE (In Full) HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) REPUBLICAN PARTY OF WISCONSIN		Transaction ID: SB29.28900 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 148 E. Johnson Street -		08 15 2008
City Madison	State Zip Code WI 53703	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		1000.00
Candidate Name	Cate Ty	• •
Senate President	ment For: Primary General Other (specify) ▼	
State: District:		
Full Name (Last, First, Middle Initial) State of Iowa		Transaction ID: SB29.28884 Date of Disbursement
Mailing Address 510 East 12th Suite 1A		0 7 M / D 1 5 / Y 2 0 0 8 Y
City Des Moines	State Zip Code IA 50319	Amount of Each Disbursement this Period
Purpose of Disbursement Chet Culver Late Filing Penalty		25.00
Candidate Name	Cate Ty	• •
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	•	1025.00
TOTAL This Period (last page this line number only)		22525.00

State: